FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

wash	ington,	D.C.	20549	

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

l	OMB APPRO	)VAL
	OMB Number:	3235-0287
l	Estimated average burd	en
l	hours per response:	0.5

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Name and Address of Reporting Person*     BOGER JOSHUA S					<u>V</u>	2. Issuer Name and Ticker or Trading Symbol VERTEX PHARMACEUTICALS INC / MA [ VRTX ]											c all applic Directo	tionship of Reportin all applicable) Director Officer (give title		son(s) to Iss 10% Ov Other (s	wner	
(Last) (First) (Middle) C/O VERTEX PHARMACEUTICALS INCORPORATED						3. Date of Earliest Transaction (Month/Day/Year) 09/09/2009											below)			below)		
130 WAVERLY STREET  (Street)  CAMBRIDGE MA 02139  (City) (State) (Zip)					-	4. If Amendment, Date of Original Filed (Month/Day/Year)									Li	Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person     Form filed by More than One Reporting Person						
Table I - Non-Derivon  1. Title of Security (Instr. 3)  2. Transation Date (Month/D			action	ction 2A. Deemed Execution Date,		, 3. Tra	3. Transaction Code (Instr.		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4		d (A) or	or 5. Amou Securiti Benefic		nt of es ally Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)					
									Co	ie \	′	Amount		(A) or (D)	Price		Transaction(s) (Instr. 3 and 4)				(11150.4)	
Common	Stock			09/09	9/2009	2009		N			6,400		A	\$13.	11	1,072,795		D				
Common	Stock			09/09	9/2009	2009		S(	1)		6,400		D	\$37	2)(3)	1,06	56,395		D			
Common Stock																	13	,286		I	401(k)	
Common Stock															207,500				Shares in trust <sup>(4)</sup>			
		7	able II -									sed of onverti					wned				•	
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Da	Date,	4. Transa Code ( 8)		n of		6. Date Expira (Month	tion D	ate	ble and	7. Title and Amount of Securities Underlying Derivative Secu (Instr. 3 and 4)		Security	De Se	3. Price of Derivative Security Instr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transactio (Instr. 4)	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exerci	sable		xpiration ate	Title		Amount or Number of Shares							
Stock Options	\$13.11	09/09/2009			M		6,400		(5	)	12	2/01/2009	Common Stock 6,40		6,400		\$0	70,374		D		

## **Explanation of Responses:**

- 1. Transaction made pursuant to Dr. Boger's company approved trading plan established under Rule 10b5-1.
- $2. Open \ market \ sales \ reported \ on \ this \ line \ occurred \ at \ a \ weighted \ average \ price \ of \$37.00 \ (range \$36.68 \ to \$37.28).$
- 3. Dr. Boger undertakes to provide (upon request by the SEC staff, the issuer or a security holder of the issuer) full information regarding the number of shares sold at each separate price.
- 4. Shares held in trust for Dr. Boger's children. Dr. Boger disclaims beneficial ownership of such shares.
- 5. Fully vested.

## Remarks:

Kenneth S. Boger, Attorney-In-

Fact Pact

\*\* Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- \* If the form is filed by more than one reporting person, see Instruction 4 (b)(v).
- \*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.